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DATE: June 13, 2008

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(Including Cover Sheet)

TO: Commissioner for Patents, USPTO

FAX #: 571-273-8300

FROM: Jacqueline S. Larson

PHONE #: (510) 749-4842  
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Date: June 13, 2008J Larson  
Jacqueline S. LarsonApplication Serial No.: 10/826,055  
Filing Date: 04/16/2004  
First Named Inventor: Garth MEIERArt Unit: 1611  
Examiner: SZNAIDMAN, Marcos L.  
Atty. Dkt. No.: MEIE-003PCommissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

The following is forwarded herewith for filing in the above referenced application:

- Request for Withdrawal as Attorney or Agent and Change of Correspondence Address

Respectfully submitted,

Jacqueline S Larson  
Jacqueline S. Larson, Reg. No. 30,279  
Attorney for Applicant(s)Dated: June 13, 2008

JUN 13 2008

Doc Code: PET.POA.WDRW

Document Description: Petition to withdraw attorney or agent (SB83)

PTO/SB/83 (04-08)

Approved for use through 12/31/2008. OMB 0651-0335  
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**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

Application Number	10826,055
Filing Date	04/16/2004
First Named Inventor	Garth MEIER
Art Unit	1611
Examiner Name	SZNAIDMAN, Marcos L.
Attorney Docket Number	MEIE-003P

**To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the practitioners of record;
- ☐ the practitioners (with registration numbers) of record listed on the attached paper(s); or
- ☒ the practitioners of record associated with Customer Number: 23979

**NOTE:** The immediately preceding box should only be marked when the practitioners were appointed using the listed Customer Number.

The reason(s) for this request are those described in 37 CFR :

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| <input type="checkbox"/> 10.40(c)(1)(i) | <input type="checkbox"/> 10.40(c)(1)(ii)        | <input type="checkbox"/> 10.40(c)(1)(iii)                  | <input type="checkbox"/> 10.40(c)(1)(iv) |
| <input type="checkbox"/> 10.40(c)(1)(v) | <input type="checkbox"/> 10.40(c)(1)(vi)        | <input type="checkbox"/> 10.40(c)(2)                       | <input type="checkbox"/> 10.40(c)(3)     |
| <input type="checkbox"/> 10.40(c)(4)    | <input checked="" type="checkbox"/> 10.40(c)(5) | <input type="checkbox"/> 10.40(c)(6) Please explain below: |  |

**Certifications****Check each box below that is factually correct. WARNING: If a box is left unchecked, the request will likely not be approved.**

- ☒ I/We have given reasonable notice to the client, prior to the expiration of the response period, that the practitioner(s) intend to withdraw from employment.
- ☒ I/We have delivered to the client or a duly authorized representative of the client all papers and property (including funds) to which the client is entitled.
- ☒ I/We have notified the client of any responses that may be due and the time frame within which the client must respond.

Please provide an explanation, if necessary:

[Page 1 of 2]

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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A. ☐ The address of the inventor or assignee associated with Customer Number: \_\_\_\_\_

OR

B. ☒ Inventor or  
Assignee name Garth Meier

Address 688 29-1/2 Road

City Grand Junction State CO Zip 81504 Country USA

Telephone 970-241-2980 Email

I am authorized to sign on behalf of myself and all withdrawing practitioners.

Signature Jacqueline S. Larson

Name Jacqueline S. Larson Registration No. 30279

Address 245 Avington Road

City Alameda State CA Zip 94502 Country USA

Date June 13, 2008 Telephone No. 510-749-4842

NOTE: Withdrawal is effective when approved rather than when received.

[Page 2 of 2]

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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